U.S. Department of Justice United States Marshals Service Document 70 CESS RECEPT AND RETURN See Instructions for "Service of Process by the U.S. Non the reverse of this form.

See Instructions for "Service of Process by the U.S. Marshal"

PLAINTIFF	United States of America					COURT CASE NUMB	BER
						07-200-CG-B	
DEFENDANT Michael Levar Hopkins						TYPE OF PROCESS Final Judgment of Forfeiture	
SERVE		DUAL, COMPANY, CO n United Stat			OR DESCRI	PTION OF PROPERTY T	O SEIZE OR CONDEMN
	ADDRESS (Street	or RFD, Apartment N	lo., City, State	and ZIP Code)			
AT	C/O USMS	<u>-</u>			C	ATS ID: 07-DE	A-495349
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:					— I Numbe	Number of process to be	
Eugene A. Seidel						with this Form - 285	/
Acting United States Attorney 63 S. Royal Street, Suite 600					r of parties to be in this case		
Mobile, AL 36602					Check on U.S	for service	
SPECIAL INST	RUCTIONS OR OTHER	R INFORMATION THA	AT WILL ASSI	ST IN EXPEDITIN	G SERVIC	E (Include Business and	Alternate Addresses, All
Telephone Num	bers, and Estimated Tim	es Available For Servic	ce):				Fold
\$4,/3/.00 in United States Currency is forfeited to the United States of America							
for disposition according to law.							
		<i>h</i> .					CT 4 6
_	orney or other Originator	equesting service on bel	half of:	PLAINTIFF		HONE NUMBER	DATE ==
George	F. May, AUSA			DEFENDAN	T 251-	441-5845	6/8/2009
SPACE B	ELOW FOR U	SE OF U.S. M	ARSHAL	ONLY — D	O NOT	WRITE BELO	W THIS LINE
		al Process District	District	,		S Deputy of Clerk	Date
number of process indicated. (Sign only first IJSM 295 if more)							1.1
(Sign only first USM 285 if more than one USM 285 is submitted) No. 03 No. 03					Jun .	6/9/09	
I hereby certify a	and return that I have p	ersonally served, hav	e legal evidence	of service, \square have	executed as	shown in "Remarks", the	process described
						ion, etc., shown at the add	
☐ I hereby cer	tify and return that I an	unable to locate the	individual, com	pany, corporation, o	etc., named	above (See remarks below	ow)
Name and title	of individual served (if	not shown above)				A person of cretion then nusual place of	suitable age and dis- esiding in the defendant's
Address (comple	te only if different than sl	nown above)				Date of Service	Time am
						6/9/09	pm
						Signiffere (of U.S.	Marshal for Deputy
Service Fee :	Total Mileage Charges (including endeavors)		SS,00	Advance Deposits	Amount o	wed to U.S. Marshal or	Amount of Refund
REMARKS:	. <u></u>	1			<u>. س رز</u>		
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